



Pain Management Referral

Assessment | Treatment | Management

PATIENT DETAILS

Name: _____

Address: _____

DOB: _____ Gender: _____

Medicare No: _____ Phone: _____

Radiologists

Dr Siavash Es'haghi
MB ChB, FRANZCR

Dr Geoffrey Clark
MBBS, BE, FRANZCR

Dr Peter Wakefield
MBBS, FRANZCR

Dr Nigel Sommerfeld
MBBS, FRANZCR

Dr Anthony Chan
MBBS, FRANZCR

Dr James Challen
MBBS, FRANZCR

Dr Angus Thomas
BSc, MBBS, FRANZCR

Dr Rodney Larsen
MBBS (Hons), FRANZCR

Dr John Evans
MBBS, B Med Sci (Hons),
FRANZCR Nuc Med Specialist

Dr Mark Sinnamon
MBBS, FRANZCR, FAANMS

Dr Noel Marginson
MBBS, FRANZCR

Dr Denise Ladwig
FRANZCOG DDU

Dr Amit Sidana
MBBS (Hons), FRANZCR

Dr Tony Bretherton
MBBS, FRANZCR

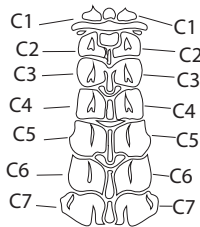
Dr John Salanitri
MBBS, FRANZCR

Dr Colin Chong
B.Sc (MBBS) M.Med FRANZCR

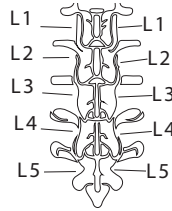
For assessment and management of the area of Concern. please indicate:

For treatment of the specified area. please indicate:

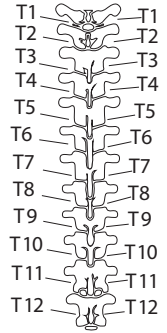
Cervical Spine



Lumbar Spine



Thoracic Spine



Musculoskeletal injection

Required Treatment: _____

Clinical Notes: _____

REQUEST

NOTES

Pain Specialists

Dr Scott Masters
MBBS FRACGP FAFMM
Dip MSM

Name: _____

CC: _____

Ph: _____

Address: _____

Signature _____ Date _____

Urgent Allergies _____

REFERRING DR

Contact

(07) 5430 3955

bookings@ipain.com.au

ipain.com.au

ABN 62 628 725 306



Please Consider The Environment
CHOOSE TO GO FILMLESS

Please tick if you wish to receive
 Film CD

All images are digitally stored for future online access or printing if required.



A better way to care

Patient Information

1 How to book?



FOLLOW 2 SIMPLE STEPS TO
GET A CALL BACK!

1. Take a photo of the front page.
 2. Send it via SMS to **0408 348 559**.
- Done!** We will contact you shortly.

OR



(07) 5430 3955



bookings@ipain.com.au



ipain.com.au/booking

By providing a photo of your referral form, we will be able to provide you more efficient service.

2 Your Appointment

Date: _____ Appointment time: _____
Please arrive 15 minutes prior to your appointment time

Preparation: _____

For preparation instructions please refer to ipain.com.au

3 What's important?

Interventional/Procedures

Please make an appointment. Preparation may be required prior to examination. All CT guided procedures are Bulk Billed. Fees may apply for Ultrasound, Fluoroscopy guided and Radiofrequency Ablation procedures.

4 Image Guided Pain Management Services

- Joint aspirations
- Hydrodilatation
- Intrathecal injections
- Radiofrequency Ablation
- Imaging-guided drainage
- Other joint steroid injections
- Spinal medial branch injections
- Platelet rich plasma (PRP) injections
- CT-guided facet joint blocks
- CT-guided nerve root blocks
- CT-guided epidural injection
- Lower extremity nerve blocks (saphenous/sural/popliteal/posterior tibial nerves)
- Greater occipital nerve injection (for occipital neuralgia)
- Shoulder barbotage (needling of shoulder calcification)

5 Where to go?

Maroochydore

60 Wises Rd, Maroochydore QLD 4558

P 5430 3955 F 5430 3997 / 8 AM - 5 PM